

To: The Honorable Randy McNally, Lt. Governor & Speaker of the Senate;
The Honorable Cameron Sexton, Speaker of the House of Representatives;
The Honorable Rusty Crowe, Chair of the Senate Health & Welfare Committee;
The Honorable Bryan Terry, Chair of the House Health Committees;
The Honorable Jason Mumpower, Comptroller of the Treasury.
From: Ashley Reed, TennCare Director of Legislation
Date: June 1, 2023
Subject: 2017 PC 483 Quarterly Update

Pursuant to PC 483, TennCare would like to provide an update on Neonatal Abstinence Syndrome (NAS) initiatives, as well as an update on Medical Loss Ratio (MLR) as it relates to NAS and opioid use.

As previously presented, TennCare has shown a continued decrease in the incidence of NAS births among TennCare eligible infants. Updated data shows that the TennCare rate of NAS births per 1,000 live births decreased from 23.99 in CY2018 to 20.9 in CY2020. A complete CY2020 TennCare NAS report is available on TennCare's website as indicated below.

- To reference the complete TennCare NAS report for CY2019, please visit the following link: <https://www.tn.gov/tenncare/information-statistics/tenncare-neonatal-abstinence-syndrome-nas-data.html>

The most current NAS data available is available on the Tennessee Department of Health's website as indicated below. Note, this data reflects statewide data produced by the Tennessee Department of Health.

- The Tennessee Department of Health's NAS Surveillance Annual Report for CY2020 can be found here: <https://www.tn.gov/content/dam/tn/health/documents/nas/NAS-Annual-Report-2020.pdf>
- The Tennessee Department of Health's NAS Surveillance Summary for July 2021 can be found here: <https://www.tn.gov/content/dam/tn/health/documents/nas/July-2021-NAS-Monthly-Update.pdf>.

TennCare is continuing to prioritize initiatives that aim to improve the health of women and infants in 2023, especially for those impacted by opioid and substance use disorder. For example:

- In April 2022, TennCare rolled out new Medicaid pregnancy and postpartum benefits to TennCare enrollees who have Medicaid during a pregnancy. These new benefits included an extension of TennCare coverage to 12 months following the end of a pregnancy. Extended coverage allows TennCare members to seek follow-up care for mental and physical health well into the postpartum period. In the FY24 budget, this extension of postpartum benefits was made permanent. Additionally, the FY24 budget increased income thresholds for pregnant women to 250% of the federal poverty level, expanding TennCare coverage to an additional 2,400 mothers

each year.

- In addition to the extended postpartum benefits and increased income threshold for coverage, TennCare, in coordination with the state's three Managed Care Organizations, rolled out a series of provider incentives in late 2021. These incentives are designed to encourage and reward the state's Medicaid providers to report pregnancies and risk factors as early as possible, engage in mental health screening, and conduct two postpartum visits.
- TennCare continues to partner with Vanderbilt University Medical Center (VUMC) to implement the Maternal Opioid Misuse (MOM) Model Grant. Tennessee was one of 10 states to be awarded the MOM Model Grant, which is a \$5.3 million-dollar federal grant funded through the Centers of Medicare and Medicaid Services (CMS) to support mothers and infants impacted by the opioid epidemic. The grant is in partnership with VUMC and aims to provide more services and resources to aid women with opioid use disorder and children with NAS or opioid exposure. The Firefly Clinic at Vanderbilt is an innovative model of care which provides wrap around services to pregnant women with substance use disorder at a single site of care. As of May 2023, there are around 100 members actively enrolled in the Firefly Clinic, with 220+ ever-enrolled in the program.
- TennCare's Managed Care Organizations (MCOs) continue to engage women of childbearing age and pregnant women who may be at risk for chronic opioid use. Through the development and implementation of a predictive risk stratification analytic algorithm, the MCO population health programs are making great strides in effectively identifying clinical risk associated with opioid misuse and abuse and in response outreaching and engaging high risk members. The MCOs continue to outreach and engage with thousands of women of childbearing age in the TennCare program.
- TennCare and its MCOs are also continuing to work diligently to expand access to all forms of high-quality medication assisted treatment (MAT) for TennCare members with opioid use disorder seeking addiction and recovery services. In addition to coverage of methadone and naltrexone, TennCare is also ensuring members can receive access to comprehensive MAT through the Buprenorphine Enhanced Supportive Medication-Assisted Recovery and Treatment (BESMART) Program. The network officially launched on January 1, 2019. As of April 2023, there are currently 475 contracted, high-quality MAT providers that have partnered with at least one of TennCare's three MCOs. This provider group includes OBGYNs that are trained in delivering MAT to this high-risk population. As compared to illicit drug use, medication assisted therapy in women with substance use disorder is associated with a greater likelihood of having a full-term infant and decreased likelihood of having a baby with low birth weight.
- On April 1, 2021, TennCare relaunched an outpatient voluntary long-acting reversible contraceptive (vLARC) (e.g., intrauterine devices, implants) program together with StellarRx Pharmacy Services, Inc. to provide same-day access to vLARC devices free of charge to provider offices and members. Stellar Pharmacy is the developer of a smart dispensing technology called the XpeDose™ cabinet which is placed in the provider's office/clinic stocked with a full array of vLARCs and replenished as needed. To date, 28 cabinets have been installed in provider offices and over 3400 TennCare and CoverKids members have had vLARCs placed.
- TennCare continues to support the statewide quality improvement program developed in conjunction with the Tennessee Initiative for Perinatal Quality Control (TIPQC) to increase access to vLARCs immediately after delivery by providing quarterly hospital utilization and reimbursement data to TIPQC executive staff for their evaluation and discussion with participating

hospitals.

Finally, TennCare is providing an update on MLR as it relates to NAS and opioid use. Below are MCO-level total MLRs and “opioid” MLRs. As outlined in the act, this data is “associated with neonatal abstinence syndrome and the use of opioids by women of childbearing age enrolled in the TennCare program.” This data set is for January 2022 through December 2022.

	<u>NAS/Opioids MLR</u>	<u>Total MLR</u>
Amerigroup	386%	89.5%
BlueCare	394%	91.7%
United	395%	91.2%

As always, the Division of TennCare hopes you find this information useful, and please let us know if you have questions with this report or any previous reports.